



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Lars Troive

Examiner: Goetz

Serial No.:

09/856,223

Group/Art No.: 3725

Filing Date: September 24, 2001

Dated: September 30, 2003

For:

METHOD AND DEVICE FOR

Docket: 821-35

DEFORMATION OF A MATERIAL BODY

MAIL STOP: PETITION Commissioner for Patents P.O. Box 1450

Alexandria, VA 22313-1450

AMENDMENT

Responsive to the Office Action mailed November 2, 2003 by the Patent and Trademark Office in the above-identified application, please enter the following Amendment:

The Amendment to the Abstract begins on page 2;

The Amendment to the Claims begins on page 3; and

The Remarks begin on page 7.

CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail, postpaid in an envelope, addressed to the: MAIL STOP: PETITION, Commissioner for Patents, P.O. Box 1450, Alexandria. VA 22313-1450 on September 30, 2003

OCT 0 3 2003

OFFICE OF PETITIONS

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AMENDMENT TRANSMITTAL FORM

Sir:

Transmitted herewith is an amendment in the above-identified application.

[x]

Small entity status of this application under 37 C.F.R. § 1.9 and 1.27 has been established by a

verified statement previously submitted.

[]

A verified statement to establish small entity under 37 C.F.R. § 1.9 and 1.27 is enclosed.

[X]

No additional fee is required.

The fee has been calculated as shown below:

For	Claims Remaining After Amendment	Highest No. Previously Paid For	Present Extra	Rate (Small Entity)	Addit. Fee	Rate	Addit. Fee
TOTAL CLAIMS	17	22	0	x 9 =	\$0	x 18 =	\$0
INDEPENDENT CLAIMS	2	3	0	x 42 =	\$0	x 84 =	\$0
[] First Presentation of Multiple Dep. Claim				140		280	\$0
			-	TOTAL:	\$		RECE

* If the entry in Col. 1 is less than entry in Col. 2, write "0" in Col. 3.

** If the "Highest No. Previously Paid for" IN THIS SPACE is less than 20, enter "20".

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*** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, enter "3". The Highest No. Previously Paid For" (Total or indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

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- [] Please charge Deposit Account No. <u>04-1121</u> in the amount of \$___. Two (2) copies of this sheet are enclosed.
- [] A check in the amount of \$ 0.00 is enclosed.
- [X] Please charge any deficiency as well as any other fee(s) which may become due under 37 C.F.R. §§1.16 and/or 1.17 at any time during the pendency of this application, or credit any overpayment of such fee(s) to Deposit Account No. <u>04-1121</u>. Also, in the event any extensions of time for responding are required for the pending application(s), please treat this paper as a petition to extend the time as required and charge Deposit Account No. <u>04-1121</u> therefor. TWO (2) COPIES OF THIS SHEET ARE ENCLOSED.

DILWORTH & BARRESE, LLP 333 Earle Ovington Blvd. Uniondale, NY 11553 (516) 228-8484 Respectfully submitted,

George M. Kaplan Reg No. 28,375

Attorney for Applicant(s)